



IN-KIND MATCH FORM GOODS AND SERVICES

Directions: Donors who provide in-kind donations of services, goods and supplies and travel, should complete and sign this form. Include on the Monthly Match Summary Form and submit with the monthly A19 Invoice Voucher.

Name: Kelly Queen - Manager	School District: Super School
	School District: Super School District
Organization Name & Address: Wal-Mart	Month & Year: September 2014

Date of Contribution	Detailed Description of Services Rendered	# of Hour(s)	Rate per Hour (\$)	Total
			TOTAL	
Date of Contribution	Detailed Description of Goods and Supplies Provided	# of Unit(s)	Rate per Unit (\$)	Total
09/01/14	Donated 250 pencils with college logos	250	1.00	250.00
09/01/14	Delivered donation to school	0.50	26.72	13.36
			TOTAL	263.36
Date of Contribution	Detailed Description of Travel Incurred	# of Mile(s)	Rate per Mile (\$)	Total
09/01/14	Miles driven	10	0.575	5.75
			TOTAL	5.75
			GRAND TOTAL	269.11

The information listed on this form is an accurate estimate of the services rendered, goods and supplies provided and travel incurred that I have provided to the GEAR UP program. I hereby certify, UNDER PENALTY OF PERJURY under the laws of the State of Washington, that this information is true and correct.

X_Kelly Queen_____	X_09/01/14_____
Contributor's Signature	Date
X_Sally Coordinator_____	X_09/01/14_____
School District's Signature	Date